Case 3:21-cv-011761KE DOCHTEDI STATIES DOSTRICT POOUR 2 PageID 644 FOR THE NORTHERN DISTRICT OF TEXAS

Alternative Dispute Resolution Summary

Provider must file completed form, in duplicate, with the U.S. District Clerk upon completion of ADR.

Civil Action number:		
Style of case:		
Nature of suit:		
Method of ADR used: Mediat	tion Mini-Trial Summary Jury Trial	
Date ADR session was held:		
Outcome of ADR (Select one):		
Parties did not use my service	es.	
☐ Settled as a result of ADR.	Parties were unable to reach settlement.	
Continuing to work with part <i>ADR Summary Form at conce</i>	ies to reach settlement (Note: provider must file supplemental lusion of his/her services).	
What was your TOTAL fee:		
Duration of ADR:	(i.e., one day, two hours)	
Please provide the names addres	sses, and telephone number of counsel on the reverse of this	
Treuse provide the numes, duales	ses, and receptione number of counsel on the reverse of this	
Provider information:		
Signature	 Date	
Address	Telephone	

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Continued

Please provide the names, addresses, and telephone numbers of counsel:

Name:	
Firm:	
Address:	
Phone:	
Name:	
Firm:	
Address:	
Phone:	
Name:	
Firm:	
Address:	
Phone:	
Name:	
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Address:	
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